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1653
Patent
266/088

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

CHADA, Kiran et al.

Serial No.: 08/852,666

Filed: May 7, 1997

For: HMGI PROTEINS IN CANCER
AND OBESITY

)
) Group Art Unit: 1653

)
) Examiner: Kam, C.

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AUG 19 2002

TECH CENTER 1600/2900

AMENDMENT TRANSMITTAL

Box No Fee - Amendment
Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment for the above-identified application.

- ☐ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

EXTENSION (months)		FEE FOR SMALL ENTITY		FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/>	\$55.00	<input type="checkbox"/>	\$110.00
2 months	<input type="checkbox"/>	\$200.00	<input type="checkbox"/>	\$400.00
3 months	<input type="checkbox"/>	\$460.00	<input type="checkbox"/>	\$920.00
4 months	<input type="checkbox"/>	\$720.00	<input type="checkbox"/>	\$1,440.00
5 months	<input type="checkbox"/>	\$980.00	<input type="checkbox"/>	\$1,960.00

- ☐ An extension for _____ months has already been secured and the fee paid therefor of _____ is deducted from the total fee due for the total months of extension now requested.

LA-244296.1

CERTIFICATE OF MAILING
(37 C.F.R. §1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

August 8, 2002
Date of Deposit

Rachel Marquez

Name of Person Mailing Paper

Signature of Person Mailing Paper

- ☐ Extension fee due with this Request ____.
- ☒ If an additional extension of time is required, please consider this a petition therefor.

FEES FOR CLAIMS:

- ☒ Applicant claims small entity status pursuant to 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

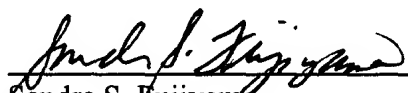
Total Claims	-	20	=	0	x	\$18.00	\$0.00
Independent Claims	-	3	=	0	x	\$84.00	\$0.00
Multiple Dependent Claims	\$280	(if applicable)				<input type="checkbox"/>	\$0.00
TOTAL OF ABOVE CALCULATIONS							\$0.00
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.						<input type="checkbox"/>	\$0.00
TOTAL FEES FOR CLAIMS SUBMITTED HERewith							\$0.00

- ☐ A check in the amount of ____ is enclosed to cover the above fee(s).
- ☐ Charge Lyon & Lyon's Deposit Account No. 12-2475 in the amount of ____.
- ☒ The Commissioner is authorized to charge Lyon & Lyon's Deposit Account No. 12-2475 for any fees required under 37 CFR §§ 1.16 and 1.17 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account 12-2475.

Respectfully submitted,

LYON & LYON LLP

Dated: 8/8/02

By: 
Sandra S. Fujiyama
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